

Raw Milk Fees

Monthly Report Of Raw Milk or Cream Used For Processing Dairy Products

Please return fee and form to:
Kansas Department of Agriculture
RECORDS CENTER - DAIRY
109 SW 9th Street
Topeka KS 66612

From _____

Address _____

Plant Location _____

Plant Number _____

For Month _____ Year _____

Kansas Dairy License Number _____

Raw milk or cream produced in Kansas delivered to a dairy manufacturing plant for manufacturing of dairy products except frozen dairy desserts and frozen dairy dessert mixes.

A1. Total lbs _____ x \$.0001 = \$_____.
(\$.01/100 lbs)

A2. **Minimum fee of \$ 2.50 is required**

Total Fees: A1 or A2 (Whichever is greater) \$_____ . _____

This report and fees are due in the office of the Dairy Commissioner on or before the end of the month following the preceding calendar month. **A penalty of 1% shall be assessed in delinquent fees for each day such fees are delinquent or \$5.00, whichever is larger.**

For and on behalf of the applicant, I, the undersigned, hereby authorize the Secretary of the Kansas Department of Agriculture or his/her authorized representative to examine all records of the applicant necessary for the purpose of verifying and determining the fee due under the dairy law to the State of Kansas. (K.S.A. 65-702)

I declare that this report, including any accompanying schedule and statement, has been examined by me and to the best of my knowledge and belief is a true, correct and complete report. I also certify that I am authorized to sign this report.

Date

Signature

For Office Use Only

_____,_____,_____._____ Lbs

\$0.0001 \$_____,_____._____ DPM _____

CK # _____